## For use of this form, see DA PAM 710-2-1. The proponent agency is USAQMS. NAME (Last, First, MI) AND SOCIAL SECURITY NUMBER INSTRUCTIONS: Overprinting is authorized. Entries in ink (MOS - pencil, Auth Alw - pencil or ink). Enter authorized allowance for each item. Enter the item description of issued items in the Clothing and Equipment block. Enter quantity of each item possessed by individual. Advance ALL totals to next column on any item changes. Individual's signature and date required on reverse side. **DUTY MOS** AUTH **CLOTHING AND EQUIPMENT** 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 ALW

ADDITIONAL ORGANIZATIONAL CLOTHING AND INDIVIDUAL EQUIPMENT RECORD